

Project RANI

Reducing **anemia** through **normative** innovations



REDUCING **ANEMIA** THROUGH **NORMATIVE INNOVATIONS**

Household and community-level beliefs and norms were challenged through a variety of Behaviour Change Interventions to improve adherence to IFA among women of reproductive age group.

RANI tackled these barriers....

Individual level: gaps in knowledge lead to misconceptions about outcomes of IFA along with normalization of being anaemic

Interpersonal level: perceptions of approval from referent groups (husbands and mothers-in-law) play a major role in a WRA's decision to take IFA tablets

Community level: women eat last and the least, their health is not a priority

Policy level: implementation of anaemia policy does not prioritise out-of-school girls and women who are not pregnant



.....using these interventions

Individual level: hemoglobin testing and participatory learning sessions

Interpersonal level: RANI-comm videos

Community level: sharing village level haemoglobin results & comparing across villages

Policy level: sharing RANI data & ensuring iron supplement supply through demand forecasting

Baseline to follow-up effect size:
12.5% decrease in proportion of anaemic women

Proportion of Anaemic Women in the RANI Project

Baseline to follow-up effect size:
88% improvement in IFA consumption

Self-reported Iron Folic Acid Consumption in the RANI Project